

Attorney Docket No.: 2132.105
Inventor Name: Jackowski et al.
COMPLETE IF KNOWN

Application No:
Filing Date:
Group Art Unit:
Examiner Name:

My residence, post office addr., and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INTER APHA TRYPSIN INHIBITOR BIOPOLYMER MARKERS INDICATIVE OF INSULIN RESISTANCE

the specification which
 X is attached hereto OR
 was filed on As United States Application No. or PCT Intl.
 Appln. No. and was amended on (if
 applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN NUMBERS:	COUNTRY:	FOREIGN FILING DATE:	PRIORITY	CERTIFIED COPY	
			NOT CLAIMED:	Yes	No
			_____	_____	_____
			_____	_____	_____
			_____	_____	_____

Additional foreign appln. nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER(s): _____ FILING DATE: _____

____ Addnl. provisional appln.
Nos. are listed on a
Supplementary priority data
Sheet PTO/SB/02B attached.

[illegible]

NAME OF SECOND INVENTOR: _____ A Petition has been filed for this unsigned inv.
GIVEN NAME (first and middle [if any]): _____ **FAMILY NAME OR SURNAME:** _____

John _____ Marshall, PhD _____
Inventor's signature: _____ Date: _____
Residence: 95 Parkside Drive _____
City: Toronto _____ State: ONTARIO M6R 2V3 _____ Country: CANADA _____ Citizenship: Canadian _____
Post Office Address: 95 Parkside Drive, Toronto Ontario M6R 2V3, CANADA _____
Additional inventors are being named on the _____ Supplemental additional inventor(s)